Application PATENT APPLICATION FEE DETERMINATION RECORD											n or Docket Number			
	PAISIN!		09929904											
CLAIMS AS FILED - PART I														
_				Column 1) (Column 2)				SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			13				1	RATE	FEE	]	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS			/3 -minus 20=		6			X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS			4_ minus 3 =		•/			X40=	110		X80=			
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT					405	40.0	1				
• 11	the difference	in column 1 is	less than ze	'· [	+135=		OR	+270=						
	108	TOTAL	39 <i>Go</i>	OR	TOTAL									
1	\ <sup>3</sup> \\ <sup>3</sup> \ c	. :	SMALL	ENTITY	OR	OTHER SMALL								
AMENDMENT A		CLAIL REMAINING	. /	NUM		PRESENT	lſ		ADDI-			ADDI-		
		AFTER AMENDMENT		PREVIO PAID		EXTRA		RATE	TIONAL		RATE	TIONAL FEE		
	Total	. 13	Minus	J	0	,	$\coprod$	X\$ 9=		OR	X\$18=			
AME	Indep ndent	- 4	Minus	4	<u> </u>	=		X40=		OR	X80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<b>!</b>	+135=		/	<b>&gt;270</b> =			
							L	TOTAL		OR	TOTAL			
(Column 1) (Column 2) (Column 3)								DDIT. FEE		OR	ADDIT. FEE			
NT B		CLAIMS		HIGH	EST :	(Column 3)	ÌΓ		ADDI-			ADDI:		
		AFTER AMENDMENT		PREVIO		PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE		
AMENDMENT	Total		Minus	••		=		X\$ 9=		OR	X\$18=	FEE		
RE	Independent	• /	Minus	. ***		= :	<b>l</b> t	X40=			X80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<b>]</b>	11.		OR				
			21				L	+135=	ing Surena History	OR	. +270≐			
							Α	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE			
		(Column 1)		(Colun		(Column 3)		14 44						
AMENDMENT C		REMAINING AFTER AMENDMENT.		PREVIO PAID	BER XUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
MQ	Total		Mińus	••		=		X\$ 9=		OR	X\$18=			
ME	independ nt		Minus	***;		=.		X40=			X80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<b> </b> -			OR				
If the entry in column 1 is less than the intry in column 2, writ "0" in column 3.								+135=		OR	+270=			
** !	"If the "Highest Number Pr viously Paid F 1" IN THIS SPACE is less than 20, ent 1" 20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, ent 1" 20."									OR	TOTAL ODIT, FEE			
		mber Previously Pak ber Previously Pak					r foun	d in the appr	roonat box	in con	ımn 1			
		12 27 19 19		· · ·	· ·	<del></del>	·			<u> </u>				

FORM PTO-875

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